## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) Senate Conservatives Fund	FEC IDENTIFICATION NUMBER ▼  C C00448696
Check if 24-hour report 48-hour report New report Amends report	t filed on
Full Name of Payee Senate Conservatives Fund	Date of Public Distribution/Dissemination  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 388	Amount
City State Zip Code	529.90
Alexandria VA 22313-0388	Transaction ID : E0B33A36242334D90B86 Date of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Online Processing  Category/ Type	03 15 7 2014
Name of Federal Candidate Support	Office Sought: House District:
Christopher Brian Mcdaniel Oppose	President Senate State: MS
	Disbursement For:
Full Name of Payee Envision Printers/Marketing	Date of Public Distribution/Dissemination
Mailing Address 2 Riverbend Pkwy	03 19 2014 Amount
City State Zip Code	10873.64
Leesburg VA 20176-0000	Transaction ID : E1A72EE50DBB9470C92F Date of Disbursement or Obligation
Purpose of Expenditure IE-McDaniel-Direct Mail Production  Category/ Type	03 / 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:
Christopher Brian Mcdaniel Oppose	President Senate State: MS
	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	11403.54
	7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	<b>&gt;</b>
(c) TOTAL Independent Expenditures	11403.54
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Paul Kilgore [Electronically Filed] Date	03
Signature	